			DOUBLE CARE LABOR VIEW			
A Larger M.	USE THIS FORM FOR AL	L ENTRIES EXCEPT C	RAFTS			
THE CLEVELAND MUSEUM OF ART				Born in Cleveland XYES NO		
FORTY-NINTH ANNUAL EXHIBITION OF WORK BY ARTI	STS AND CRAFTSMEN OF THE WES	Entered Prev	Entered Previous May Shows? X YES NO			
MAY 3 to JUNE 18, 1967			Littorou 1 107	rous may onone.		
Collaborator if any		Artist FRAM	JK E.	BUNTS	1/	
V = Z >		FIR	STNAME	L AST NAME		
Address BOX 1049 STAT	E COLLEGE A	RKANSAS		Tel. WE-5-6	1818	
NO. STREET	CITY	ZIP CODE	COUNTY			
Out-of-town residents should state whether return shipn	nent is required. Tyes No					
Please bring Registration Fee of \$2.00 (Cash or Check)	with your entries.					
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tist FRANK E. BUNTS Artist FRANK E. BUNTS Arti			Artist			
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This entry blank must be fully made out (typewritten or plainly lettered for catalog purposes) and signed. Unsigned entry blanks will not be accepted.

Note calendar for delivery and return of objects carefully. It is understood that the Museum will have the right to dispose for its own account any entry not called for by July 25, 1967.

It is also understood that accepted entries will remain on exhibition until June 18 1967.

The submission of entries will be construed as acceptance of all conditions printed in this entry blank.

SUBMIT ENTRIES WITH ENTRY BLANK AND FEE MARCH 11 THROUGH MARCH 18, 1967.

Submit one entry blank in triplicate per person. One copy, complete with juror's marks, will be returned to you as notification of acceptance or rejection. THIS COPY IS YOUR ONLY RECEIPT TO CLAIM YOUR ENTRIES. Do not lose it.

This form in duplicate is made up of N C R paper which does not require carbon.

Frank F. Bunts

REJECTED: May 6 - May 20

ACCEPTED: June 23 - July 8